

LEGISLATURE OF NEBRASKA
NINETY-SIXTH LEGISLATURE
SECOND SESSION

LEGISLATIVE BILL 1402

Introduced by Bohlke, 33

Read first time January 20, 2000

Committee: Banking, Commerce and Insurance

A BILL

- 1 FOR AN ACT relating to insurance; to require uniform prescription
- 2 drug information cards for certain coverage.
- 3 Be it enacted by the people of the State of Nebraska,

1 Section 1. (1) It is the intent of the Legislature to
2 lessen waiting time for patients, decrease administrative burdens
3 for pharmacies, and improve care to patients by minimizing
4 confusion, eliminating unnecessary paperwork, and streamlining
5 dispensing of prescription products paid for by third-party payors.
6 This section should be broadly applied and interpreted to
7 effectuate this purpose.

8 (2) On and after January 1, 2001, all insurers
9 delivering, issuing for delivery, or renewing in this state health
10 benefit plans which provide coverage for prescription drugs and
11 devices shall issue to its insureds a card or other technology
12 containing uniform prescription drug information. The uniform
13 prescription drug information card or technology shall be in the
14 format (a) approved by the National Council for Prescription Drug
15 Programs and shall include all data fields which conform to the
16 most recent pharmacy identification card or technology
17 implementation guide produced by council or (b) recommended by a
18 national association and approved by the Director of Insurance.

19 (3) A uniform prescription drug information card or
20 technology, as required under subsection (2) of this section, shall
21 be issued by an insurer upon enrollment in a health benefit plan
22 and reissued upon any change in the insured's coverage that impacts
23 data contained on the card or technology. Cards or technology
24 shall be updated with the latest coverage information and shall
25 comply with the format as approved in subsection (2) of this
26 section.

27 (4) For purposes of this section, health benefit plan
28 means any individual or group sickness and accident insurance

1 policy or subscriber contract, nonprofit hospital or medical
2 service policy or plan contract, or health maintenance organization
3 contract. Health benefit plan does not mean one or more, or any
4 combination, of the following:

5 (a) Coverage only for accident or disability income
6 insurance, or any combination thereof;

7 (b) Credit-only insurance;

8 (c) Coverage for specified disease or illness;

9 (d) Limited-scope dental or vision benefits;

10 (e) Coverage issued as a supplement to liability
11 insurance;

12 (f) Automobile medical payment insurance or homeowners
13 medical payment insurance;

14 (g) Insurance under which benefits are payable with or
15 without regard to fault and which is statutorily required to be
16 contained in any liability policy or equivalent self-insurance
17 coverage; and

18 (h) Hospital indemnity or other fixed indemnity
19 insurance.

20 (5) The Department of Insurance may suspend or revoke the
21 certificate of authority of any insurer that delivers, issues for
22 delivery, or renews a health benefit plan in violation of this
23 section.

24 (6) The department shall enforce this section. The
25 department may adopt and promulgate rules and regulations to carry
26 out the purposes of this section.